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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092

: (850)878-5368

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#### Foreign Limited Liability Company 50 BY 50 REO II LLC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$160.00

J. BRYAN

JUN - 9 2010

#### **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJ	ECT: 50 BY 50 REO II LLC		
	(Name o	of Limited Liability Company)	
Florid	nclosed "Application by Foreign Limit a," Certificate of Existence, and check ty company to transact business in Flo	ed Liability Company for Authorization to Tran are submitted to register the above referenced for rida	sact Business in oreign limited
Please	return all correspondence concerning	this matter to the following:	
	Michael Polidoro, Esq.		
		(Name of Person)	
	FORTRESS INVESTMENT G	ROUP LLC	<b>5</b>
		(Firm/Company)	
	1345 Avenue of the Americas, 4	lốth FL	-8 ARY OF
		(Address)	TERRED
	New York, NY 10105		
		City/State and Zip Code)	<del>~~_</del>
for fu	rther information concerning this matt	er, please call:	
	Michael Polidoro	at ( <sup>2</sup> 12 ) 479-5292	
	(Name of Person)	(Area Code & Daytime Telephone N	umber)
	MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclos	ted is a check for the following amount [3125.00 Filing Fee [3130.00 Filing Certific	Fec & - 🔲 \$155.00 Filing Fec & - 🔀 \$160.00 Filing F	Fee, Certificate us & Certified Copy

Albert Charles of the state of

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 50 BY 50 REO II LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC."> (Jurisdiction under the law of which foreign limited liability company is organized) September 4, 2009 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") upon qualification (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 1345 Avenue of the Americas, 46th FL, New York, NY 10105 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Drawbridge Special Opportunities Fund LP - 1345 Avenue of the Americas, 46th FL, New York, NY 10105 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under ceth of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Investment Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes

an affirmation under the possities of perjury that the facts stated herein are true.)

James K. Noble III, Authorized Representative

Typed or printed name of signce

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:			
	50 BY 50 REO II LLC			
If	name unavailable, the alternate name to be used in the state of Florida is:			
		<u>朝</u>	<u></u>	
2.	2. The name and the Florida street address of the registered agent and office are:  C T Corporation System			
				1
	(Name)	E F	2	
	1200 South Pine Island Road		8:0	Va.
	Plorida Street Address (P.O. Box NOT ACCEPTABLE)	120	Ø	
	Plantation FL 33324			
	City/State/Zip			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

C T Corporation System

Debisions Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "50 BY 50 REO II LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF JUNE, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

TO JUN-8 AH 8: 09

SECRETARY OF STATE

ALL AND SSEE FLORING

4727884 8300

100627325

AUTHENTICATION: 8034039

DATE: 06-03-10

You may varify this cortificate online at corp. delaware. gov/authver. shtml